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STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC
SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF DENTISTRY
DOCKET NO.

In the Matter of)	
THOMAS LAURENCE TALLON, D.D.S.))	Administrative Action
Licensed to Practice Dentistry)	CONSENT ORDER
in the State of New Jersey)	
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This matter was opened to the New Jersey State Board of Dentistry ("Board") upon receipt of a Report of Investigation from the Enforcement Bureau (Professional Boards Section) which disclosed that in response to an observation that Thomas Laurence Tallon, D.D.S. had ordered at least 1500 Tylenol with Codeine #4 tablets (a Schedule III Controlled Dangerous Substance), the D.E.A. conducted an audit of Dr. Tallon's office on July 23, 1991, which revealed various violations including no biennial C.D.S. inventory, incomplete C.D.S. purchase records, no C.D.S. dispensing records and no C.D.S. theft/loss reports filed. The Report also disclosed that the D.E.A. obtained a signed voluntary surrender for cause for both state and federal C.D.S. registrations assigned to Dr. Tallon.

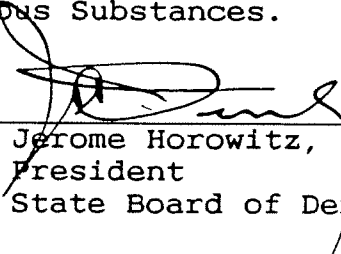
It appearing that Dr. Tallon wishes to resolve this matter without recourse to formal proceedings and for good cause shown;

IT IS ON THIS 6th DAY OF ~~SEPTEMBER, 1992,~~ JANUARY, 1993,

HEREBY ORDERED AND AGREED THAT:

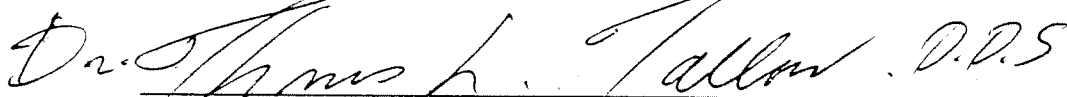
1. Dr. Tallon is hereby assessed a civil penalty in the amount of \$2,500.00 to be submitted by certified check or money order made payable to the State of New Jersey and submitted to the State Board of Dentistry at 124 Halsey Street, Sixth Floor, Newark, New Jersey 07102 no later than the first day of the month following the entry date of this Order.

2. Dr. Tallon is hereby reprimanded for his conduct in connection with the violation of the laws and regulations governing Controlled Dangerous Substances.



Jerome Horowitz, D.D.S.
President
State Board of Dentistry

I have read and understand
the within Order and agree
to be bound by its terms.
Consent is hereby given to
the Board to enter this Order.



Thomas Laurence Tallon, D.D.S.